

USE THIS FORM FOR ALL ENTRIES EXCEPT CRAFTS - PLEASE TYPE OR PRINT

THE CLEVELAND MUSEUM OF ART

FIFTY-SECOND ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE

MAY 5 to JUNE 13, 1971

Miss  Mrs.  Mr. Artist

William Owen

Born in Cleveland  Yes  No

Entered Previous May Shows?  Yes  No

Permanent Address

STREET  
To John Kovach  
ZIP  
COUNTY

CITY

Tel. ( )  
AREA CODE

Temporary Address

STREET  
14146 Superior

CITY  
Clare Hts

ZIP  
44106

Tel. ( )  
AREA CODE  
932 5246

Collaborator

(IF ANY)

Collect return shipment desired.  Yes  No

Shipping address

This form in triplicate is made up of N C R paper which does not require carbon paper.

One copy, complete with juror's marks, will be returned to you as notification of acceptance or rejection, the last week in April.

THE RETURNED COPY IS YOUR ONLY RECEIPT TO CLAIM  
YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed below.

It is also understood that accepted entries will remain on exhibition until June 13, 1971.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

SIGNATURE  
William Owen

RETURN DATES FOR OBJECTS - Monday through Saturday 9:00 a.m.  
to 4:45 p.m. at Museum Service Entrance (West side of Museum)

REJECTED ENTRIES: May 8 - May 15, 1971

ACCEPTED ENTRIES: June 19 - June 26, 1971

SUBMIT ENTRIES WITH ENTRY BLANK AND FEE OF \$2.00 MARCH 13 THROUGH MARCH 20, 1971.

FIRST NAME

LAST NAME

EACH BOX INDICATES A SEPARATE ENTRY

LIMIT OF 2 ENTRIES PER PERSON

CATEGORY	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
----------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

MEDIUM

TITLE	The Day THEY BLEW UP THE World
-------	--------------------------------

PRICE OR INSURANCE VALUE	300	SIZE
-----------------------------	-----	------

GRAPHICS AND PHOTOGRAPHY ONLY

NUMBER FOR SALE	NUMBER IN EDITION	PRICE UN- FRAMED	PRICE OF FRAME	NO. OF FRAMES FOR SALE
-----------------------	-------------------------	---------------------	----------------------	------------------------------

DO NOT WRITE IN THIS SECTION

551 (1)	ACCEPTED	REJECTED
---------	----------	----------

CATEGORY	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
----------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

MEDIUM

TITLE
-------

PRICE OR INSURANCE VALUE	SIZE
-----------------------------	------

GRAPHICS AND PHOTOGRAPHY ONLY

NUMBER FOR SALE	NUMBER IN EDITION	PRICE UN- FRAMED	PRICE OF FRAME	NO. OF FRAMES FOR SALE
-----------------------	-------------------------	---------------------	----------------------	------------------------------

DO NOT WRITE IN THIS SECTION

552 (1)	ACCEPTED	REJECTED
---------	----------	----------

DATE RECEIVED	BY
---------------	----